Name (yan Ise	een	Office	(if applicable)	>17	Trus	tee	District (if applicable)
Name (215 51	ve ski	e 5	(ii applicable)		750	425	6778
	Address (include city ar	nd zip code)	1	-			Telephone No.	•
E-Mail A	Address	- e yo	neo	0) / (
Select /	Appropriate Box(es)	DEANDIDATI	PAC	BAG [POLPE	RTY IND I	EXP NONPR	OFIT CORP
		AMENDED	☐ ANNU	AL FILING [PETITIO OR EXF	NERS WHO IN PEND FUNDS I	NEXCESS OF 10H	E PETITION & RECEIVE
		Due January 1 2005 – December 3						
ī		ue August 8, 20 2006 — Aug 3, 200						
		— October 31, 2006 — Oct. 26, 20						
		— January 15, , 2006 — Dec. 31, 2					500	R OFFICE USE ONLY
		- Due January 1 y 1, 2006 – Dece		2006				ROPPICE USE ONLY
	These Reports are Third Report suffi							cycle Cumulative
	CONT	RIBUTIONS SU	MMARY					From Beginning of Report Period #1
							This Period	through End of This Reporting Period
	Total Monetary Contr (See page 1 of ins	truction sheet)				H	1200	\$1200
:	Total Monetary Contr (See page 2 of ins		f \$100 or Les	S				
	 Total Monetary Cont party. (See page 2 c 			aranteed by a	third			
	 Total Monetary Cont (See page 2 of instr 		of loans that		С	umulative From		
				This Period	R Ti	eginning of eport Period #1 hrough End of his Reporting eriod		
,	5. Total Amount of M	onetary Contributi	ons		*	onou.	6	41.
(Total Amount of Writ		r).	1		1/200	Alhoo
	Contributions (When contribution (monetary or (See page 2 of instruction)	r in kind)) on sheet)					<u>forter</u> or a	
)	 Total Value of In Kii Excess of \$100 	(See page 2 of instru		17204	,43	7204.0	B	
			1	EXPENSES	SUMMA	ARY		
	 Total Monetary Exp (See page 2 of inst 		ss of \$100			Ź	1017.1	E \$ 1017.16
	9. Total Monetary Expe	H 1985 1985 11 11 11 11 11 11 11 11 11 11 11 11 11	or Less			- /	10111	6
	(See page 2 of inst	ruction sheet)					#///	1111
	10. Total Amount of A			thoot)		4	11/20 15	- \$1170
	(Add Lines 8 and 9) 11. Total Value of In Ki			areer)	1	1	1110.15	1/1/07/
	of \$100 (See pag	e 3 of instruction s					_	
	Disposition of Unsp (Only reported on Reg		port or 15th					
	day of the second mo	nth after candidate						
	incumbent does not n (See page 3 of instruct							
				AFFIRI	MATION			
11	Declare Under Per	nalty of Perjury	That the F	oregoing i	s True a	nd Correct,		
		> /						01-1-1
7								V / ////
Signatu	Jan 15	orc	~				Da	1/06

	Period
JOOLE	renou i

Nar	ma	(nrii	ንተነ

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
8/1/06	100			
7/28/06	200		es me	
6/20/04	700			
5/20/04 Sun Va	120 Blv.			
	,			
	CONTRIBUTION		CONTRIBUTION CONTRIBUTION HERE IF LOAN	DATE OF EACH CONTRIBUTION AMOUNT OF EACH CONTRIBUTION CHECK HERE IF LOAN GUARANTEED BY 3 ^{RO} PARTY

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Revised: Oct-05

_OF___

#

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
Sterm Displys	3/22/06	Bill Banels	3500			
Siema Displays POBOX 21 Aquatic Pisplay 245 blue skirs i Simple Media 1 131 vassiest.	5/4/06 Dr 500	see atraheel	2204.43			
Simple 13 Yoursest.	Thola.	Bill Bound	1500			
		- 2- 0			- 9	
				120		

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PAGE 3 OF

AQUATIC DISPLAY



Aquarium Rental and Maintenance

(775) 425-6778

265 Blue Skies Drive Sparks, Nevada 89436

INVOICE NO.
DATE /21/2006
ACCOUNT NO.
TERMS

Bodera for WCSDThestee

QTY.	UNIT	DESCRIPTION	UNIT PRICE		AMOU	NT
3	me	Office Machine Usage	830	20	249	00
12	Ars	Truck Royal Gyras	25	20	300	2
50	490	rices Rebar (sign sust)	a.		95	43
3	mo	Office Space	500	00	1500	00
1000	Cords	Business Cards			60	00
			1 9		9 1017	
100			1			
					Mary JEAN	
Spanish a	7	10				

PLEASE PAY FROM THIS INVOICE

TOTAL 2204 43

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NRS 294A.365	EXPENSE	AMOUNT OF EACH EXPENSE
\Box	6/15/04	\$150.00
	8/1/06	\$150.00
Q	6/21/06	717.15
G	4/1/06	\$ 77.00
5	6/10/06	\$34.00
	D P G	D 8/1/06 D 6/21/06 G 6/1/06

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